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**TABLE 1**  
**Anti-TNF Therapy can Effectively Prevent Mortality during Acute DSS-  
Induced Colitis in Mice**

Treatment	No. of survivors/no. tested	% Survival
Untreated	22/42	52
Preimmune	5/10	50
Anti-TNF	10/10	100

**TABLE 2**  
**Anti-TNF Therapy can Effectively Prevent Bloody Stools during Acute DSS-Induced Colitis in Mice**

Treatment	No. of Hemocult positive/no. tested	% Hemocult positive
Untreated	13/15	87
Preimmune	12/13	92
Anti-TNF	3/14	21

**TABLE 3**  
**Anti-TNF Therapy can Effectively Treat Acute DSS-Induced Colitis in Mice**

Treatment	No. of survivors/no. tested	% Survival	% Diarrhea
Untreated	8/15	53	87
Preimmune	4/13	31	92
Anti-TNF	13/14	93	21

**Figure 1**

**Anti-TNF IgY has Greater Neutralization Activity than Remicade in a Cell Based Assay**

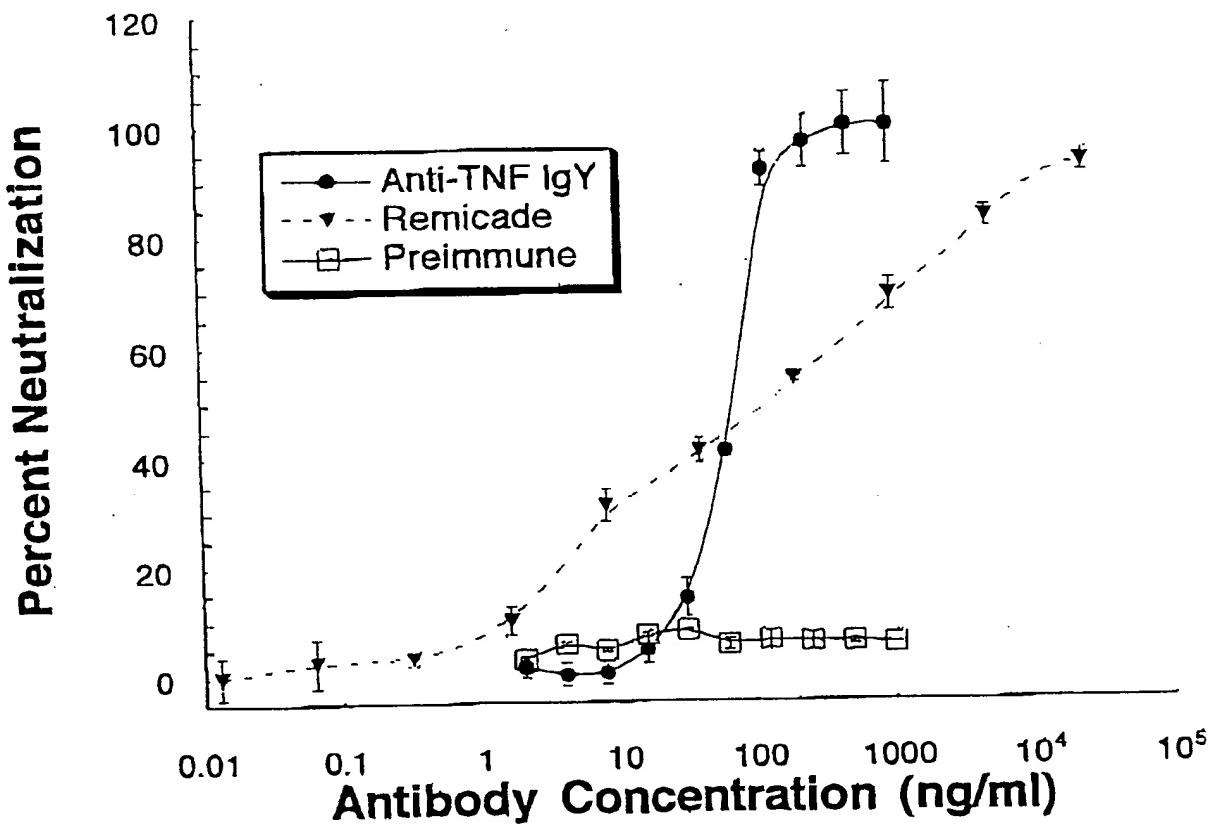


Figure 1.1. The L929 cell based assay shows the greater neutralization ability of anti-TNF IgY as compared to Remicade. The dose of antibody which prevents 50 percent of the cytotoxicity associated with TNF (ND50) is 70 ng/ml for the anti-TNF IgY, and 140 ng/ml for Remicade.  
Note: The concentrations graphed for the Remicade antibody represent the total amount of specific antibody, whereas the anti-TNF IgY concentrations represent total IgY concentrations, not specific for TNF.

**Figure 2**

**Treatment of Crohn's Disease by Various Doses of Anti-TNF In the TNBS Animal Model**

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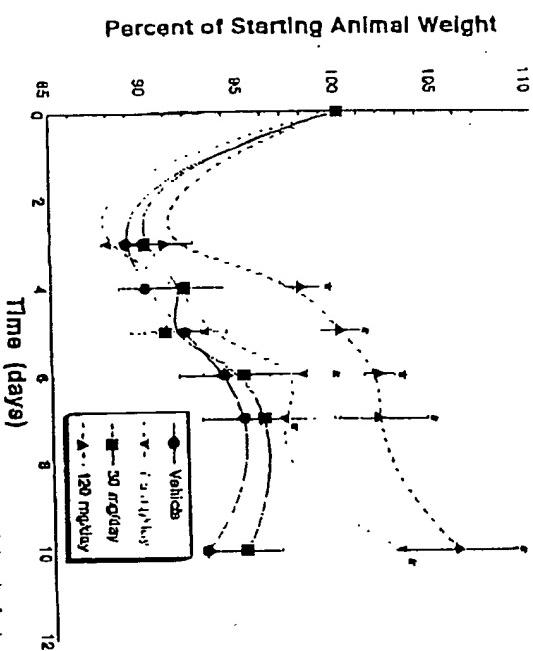


Figure 2.1. The highest dose of anti-TNF promoted TNBS-induced animal weight loss as compared to the vehicle control and lower doses (\*nsA, p<0.05 for all time points). The 7.5 mg/day dose was significantly higher than for all the vehicle and 30 mg/day doses at days 6 and 10, and on day 7 higher than the vehicle group (\*nsA, p<0.05). Mann-Whitney statistical test.

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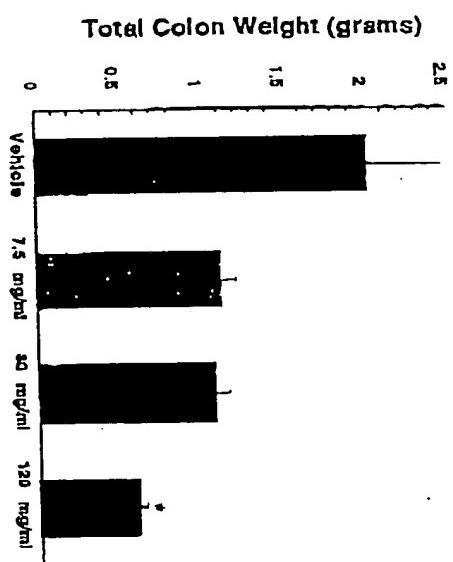


Figure 2.2. Oral treatment with anti-TNF reduced the mean total colon weight at all doses measured. The 120 mg/day dose is statistically significant as compared to the vehicle and lower doses (\*nsA, p<0.05, p<0.01, Mann-Whitney statistical test).

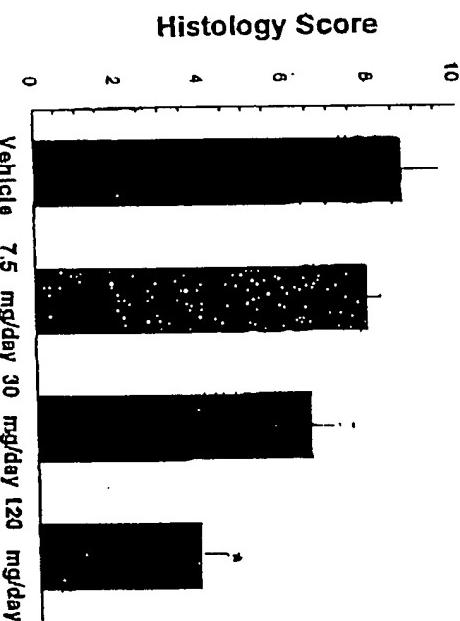


Figure 2.3. Oral treatment with the highest dose of anti-TNF significantly reduced the histological damage as compared to the vehicle and two other doses (\*nsA, p<0.025, and p<0.026). Mann-Whitney statistical test.

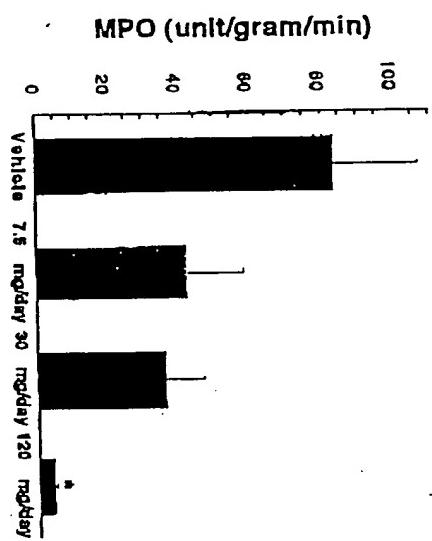
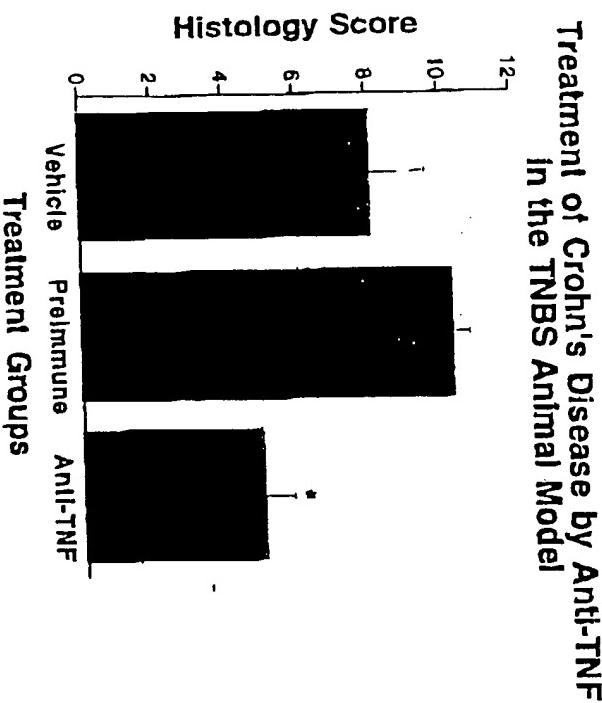


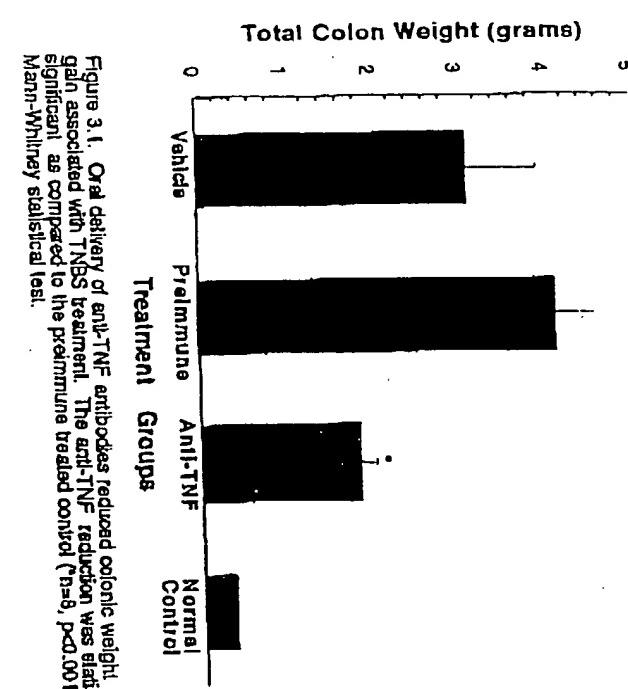
Figure 2.4. Oral administration of 120 mg/day of anti-TNF significantly reduces MPO levels as compared to the vehicle control, as well as the 7.5 mg/day and 30 mg/day doses. (\*nsA, p<0.025, p<.005, and p<0.005 respectively) Mann-Whitney statistical test.

**Figure 3**

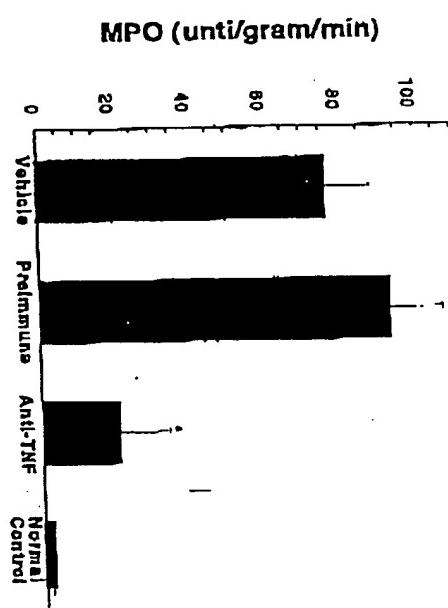
### Treatment of Crohn's Disease by Anti-TNF In the TNBS Animal Model



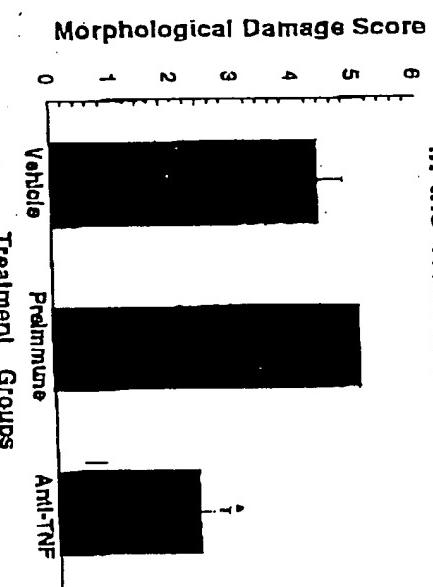
**Treatment of Crohn's Disease by Anti-TNF  
in the TNBS Animal Model**



**Figure 3.1.** Oral delivery of anti-TNF antibodies reduced colonic weight gain associated with TNBS treatment. The anti-TNF reduction was statistically significant as compared to the preimmune treated control ( $n=8$ ,  $p<0.001$ ). Mann-Whitney statistical test.



**Treatment of Crohn's Disease by Anti-TNF  
in the TNBS Animal Model**



**Figure 3.2.** Oral delivery of anti-TNF reduced histological damage for rats treated with TNBS as compared to vehicle (DMSO,  $p<0.01$ ) and preimmune controls ( $n=8$ ,  $p<0.01$ ). Normal control was zero. Mann-Whitney statistical test.

Figure 3.3. Treatment with anti-TNF reduces histological damage as compared to the vehicle and preimmune control animals ( $n=7$ ,  $p<0.05$  and  $p<0.0025$  respectively).  
( $^{***}$  indicates statistical test)

Figure 3.4. Oral delivery of anti-TNF antibodies significantly reduced the levels of tissue myeloperoxidase after rats treated with TNBS as compared to the preimmune ( $n=8$ ,  $p<0.01$ ) and the vehicle controls ( $n=8$ ,  $p<0.05$ ). Mann-Whitney statistical test.

**Figure 4**

**Treatment of Crohn's Disease by Anti-TNF is more Effective than Sulfasalazine in the TNBS Animal Model**

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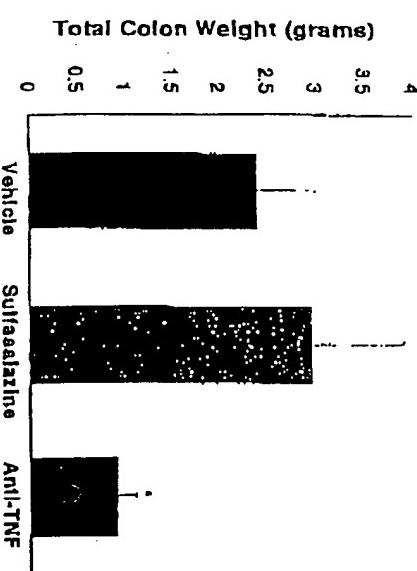


Figure 4.1. Oral administration of anti-TNF antibodies to rats 48 hours post-treatment with TNBS significantly decreased disease associated colonic weight gain as compared to vehicle treated animals ( $p<0.05$ ). Mann-Whitney statistical test.

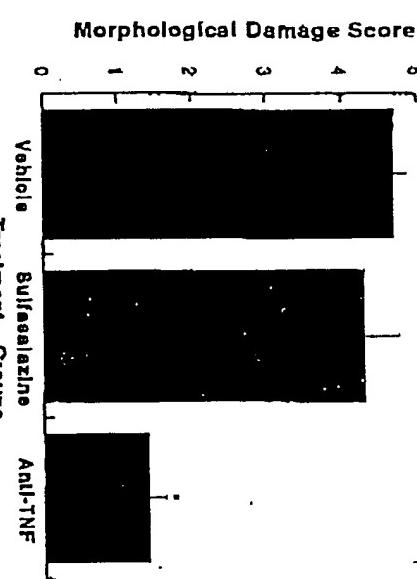


Figure 4.2. Oral administration of anti-TNF antibodies to rats 48 hours post-treatment with TNBS significantly decreased morphological damage as compared to the vehicle control ( $n=7$ ,  $p<0.002$ ) and sulfasalazine group ( $n=7$ ,  $p<0.05$ ). Mann-Whitney statistical test.

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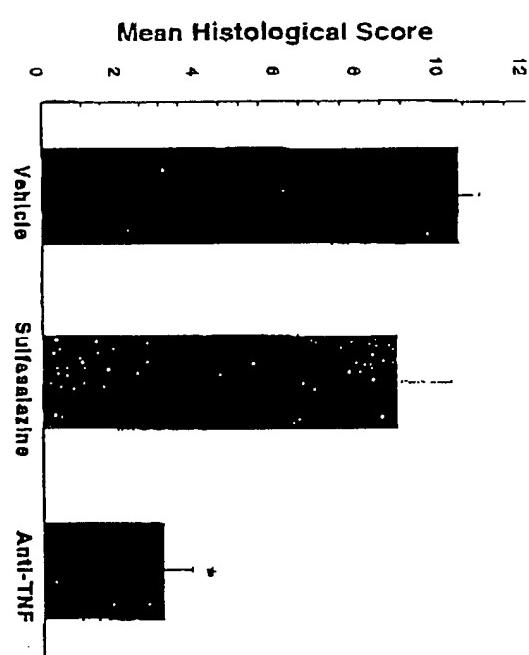


Figure 4.3. Treatment with anti-TNF significantly reduces histological damage as compared to the sulfasalazine and vehicle treated controls ( $n=7$ ,  $p<0.01$  and  $p<0.001$  respectively). Mann-Whitney statistical test.

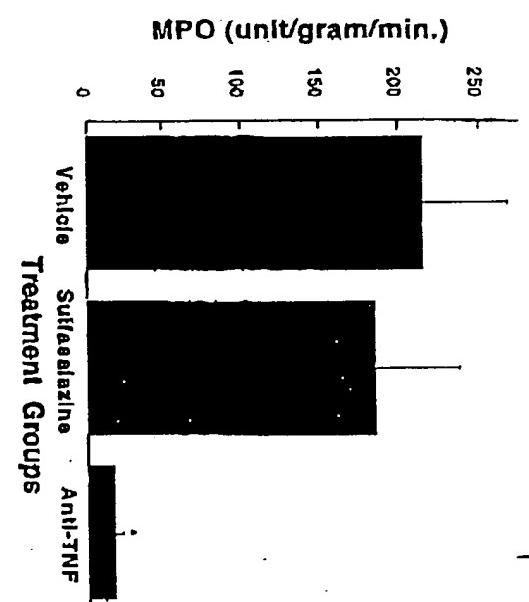


Figure 4.4. Oral administration of anti-TNF antibodies to rats 48 hours post-TNBS treatment significantly reduced the tissue myeloperoxidase as compared to vehicle ( $n=7$ ,  $p<0.02$ ) and sulfasalazine ( $n=7$ ,  $p<0.05$ ). Mann-Whitney statistical test.

**Figure 5**

**Treatment of Crohn's Disease by Anti-TNF is more Effective than Dexamethasone in the TNBS Animal Model**

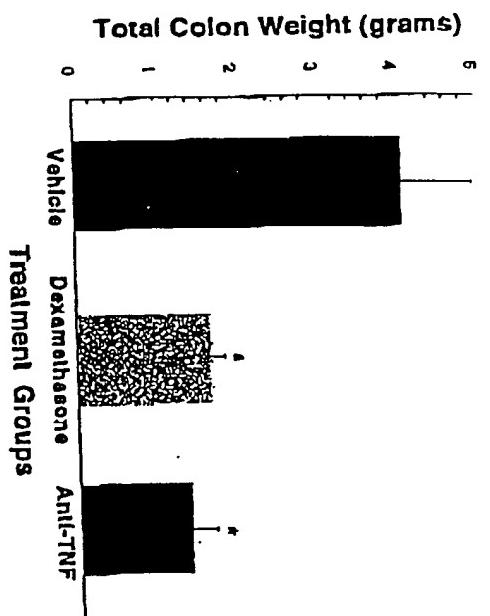


Figure 5.1. Oral administration of anti-TNF and dexamethasone significantly reduces total colon weight as compared to the vehicle control (\*\*\*, p<0.001 and p<0.05 respectively). Mann-Whitney statistical test.

**Treatment of Crohn's Disease by Anti-TNF is more Effective than Dexamethasone in the TNBS Animal Model**

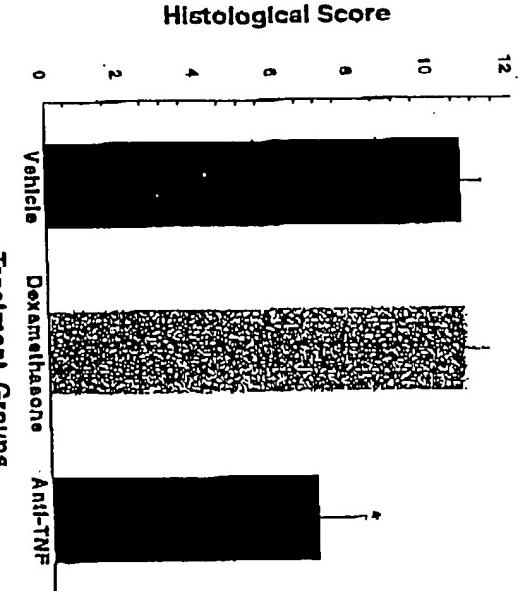


Figure 5.2. Oral administration with anti-TNF significantly reduces histological damage as compared to the dexamethasone and vehicle treated animals (\*\*\*, p<0.001 and p<0.01. Mann-Whitney statistical test).

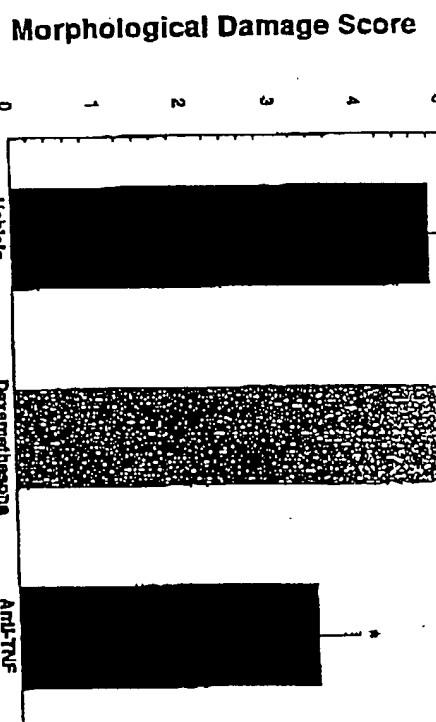


Figure 5.2. Oral administration with anti-TNF significantly reduces morphological damage as compared to the vehicle and dexamethasone treated groups (\*\*\*, p<0.05 and p<0.025 respectively). Mann-Whitney statistical test.

**Treatment of Crohn's Disease by Anti-TNF is more Effective than Dexamethasone in the TNBS Animal Model**

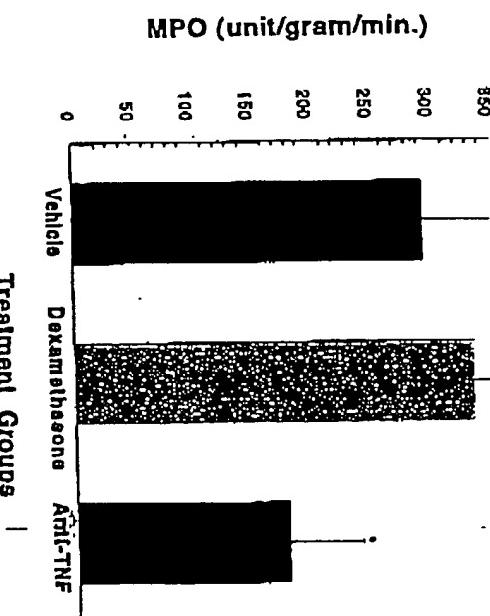


Figure 5.4. Oral administration of anti-TNF significantly reduces myeloperoxidase levels as compared to dexamethasone treated animals (\*\*, p<0.05. Mann-Whitney statistical test).

**Figure 6**

**Treatment of Crohn's Disease by Anti-TNF  
in the Chronic TNBS Animal Model**

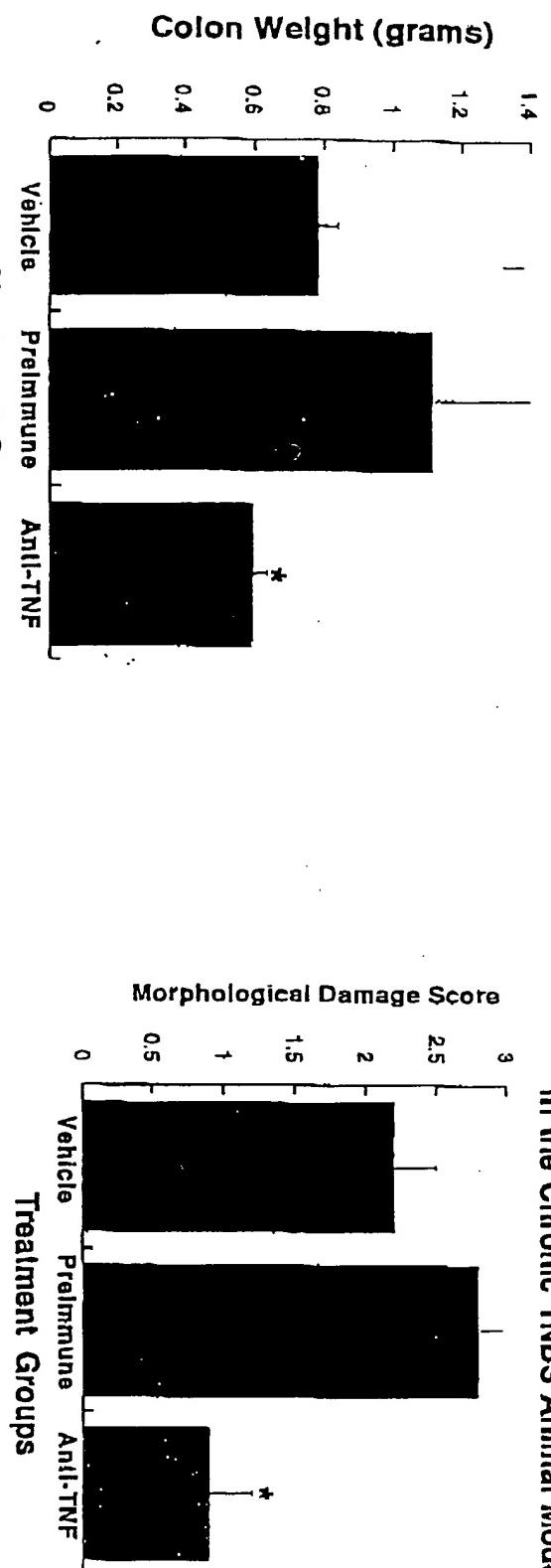


Figure 6.1. Oral treatment with anti-TNF significantly decreases the colon weight as compared to the vehicle and preimmune controls. (\*p<0.025 vs. vehicle and preimmune). Mann-Whitney statistical test.

**Treatment of Crohn's Disease by Anti-TNF  
in the Chronic TNBS Animal Model**

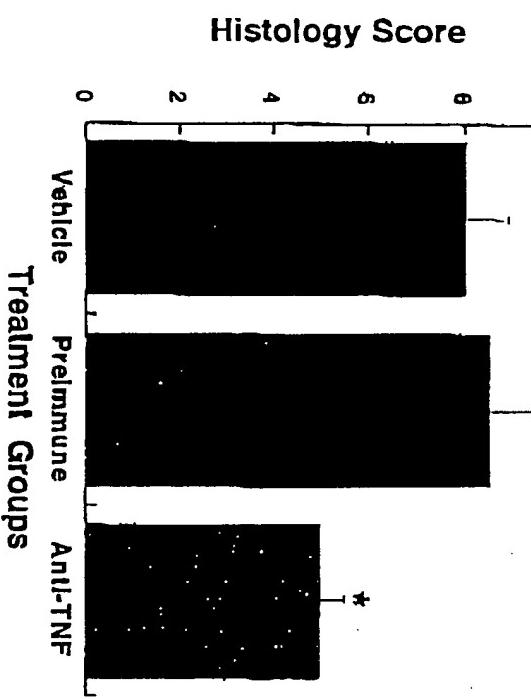


Figure 6.3. Oral treatment with anti-TNF significantly decreases the microscopic damage as compared to the vehicle and preimmune controls (p<0.025 and p<0.01 respectively). Mann-whitney statistical test.

**Figure 7**

### Treatment of Ulcerative Colitis by Anti-TNF in the DSS Animal Model

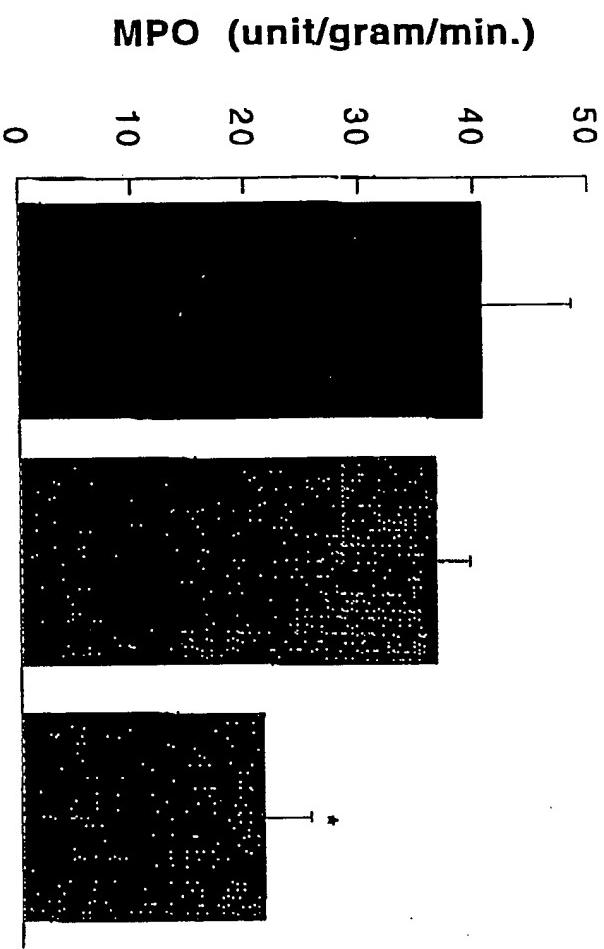


Figure 7.1. Infraredal delivery of anti-TNF antibodies beginning day 3 of a 7 day DSS treatment regimen significantly reduces tissue myeloperoxidase levels as compared to preimmune control ( $n=5$ ,  $*p<0.05$ ), but not the vehicle control ( $n=10$ ,  $'p<0.2$ ) Mann-Whitney statistical test.

**Figure 8**

### Treatment of Ulcerative Colitis by Anti-TNF in the DSS Animal Model

Treatment of Ulcerative Colitis by Anti-TNF in the DSS Animal Model

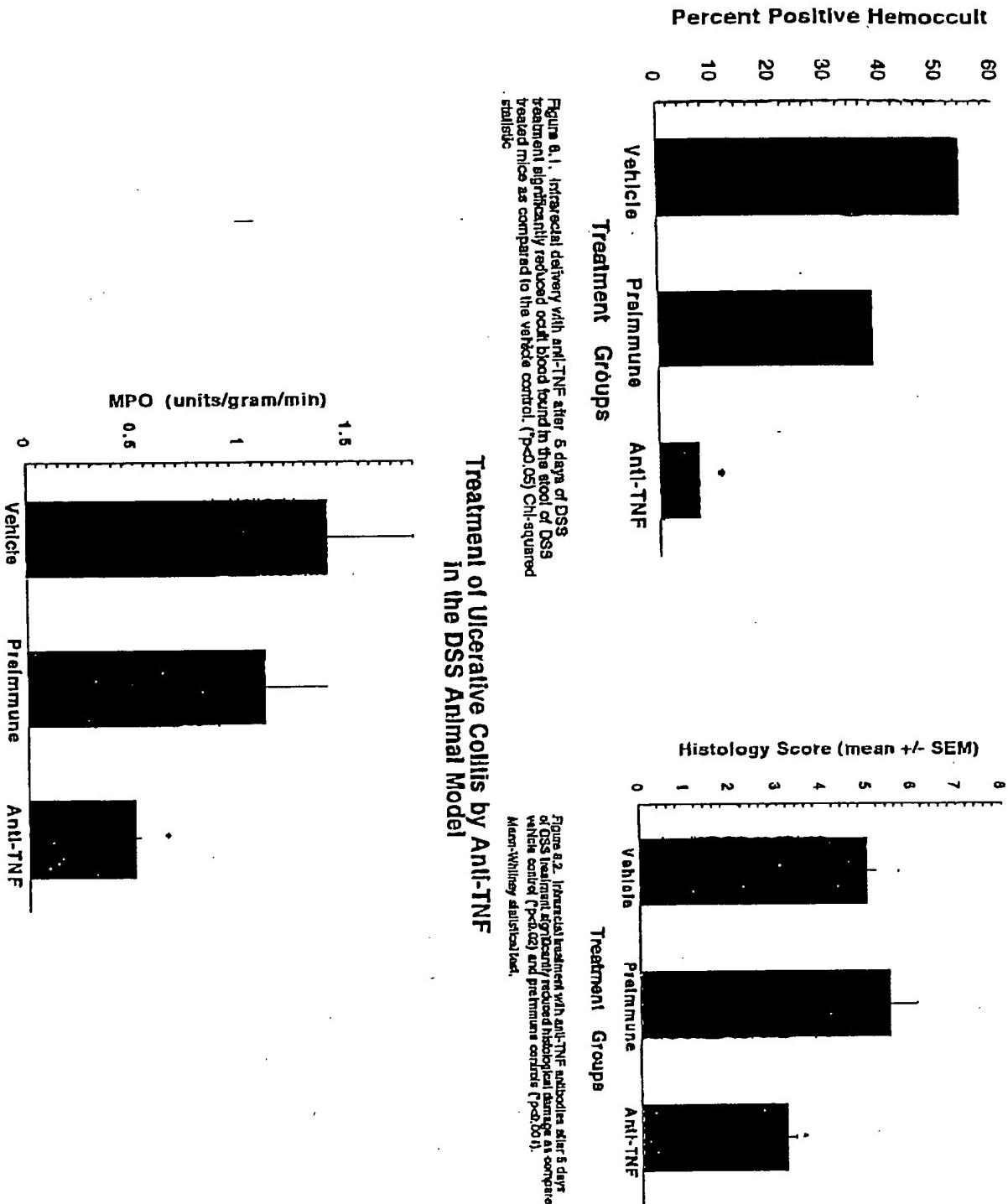


Figure 8.1. Intrarectal delivery with anti-TNF after 5 days of DSS treatment significantly reduced occult blood found in the stool of DSS treated mice as compared to the vehicle control. ( $p<0.05$ ) Chi-squared statistic.

### Treatment of Ulcerative Colitis by Anti-TNF in the DSS Animal Model

Figures 8.2. Intrarectal treatment with anti-TNF antibodies after 5 days of DSS treatment significantly reduced histological damage as compared to vehicle control ( $p<0.05$ ) and preliminary control ( $p<0.05$ ). Mann-Whitney statistical test.

Figure 8.3. Intrarectal delivery of anti-TNF antibodies after 5 days of DSS treatment decreased tissue myeloperoxidase levels as compared to the vehicle control ( $p<0.05$ ) and the preliminary control ( $p<0.05$ ). Mann-Whitney statistical test.



Figure 11.3. Oral treatment with anti-IL-6, 8, and 12 decreased the histological damage from TNBS, as compared to the preimmune control. Only anti-IL-6 treatment was statistically significant ( $n=6$ ,  $p=0.05$ ).

Figure 11.4. Oral treatment with anti-IL-6, 8, and 12 decreased the tissue MPO levels. Anti-IL-8 significantly lowered the MPO as compared to the preimmune control \* ( $n=6$ ,  $p=0.05$ ).

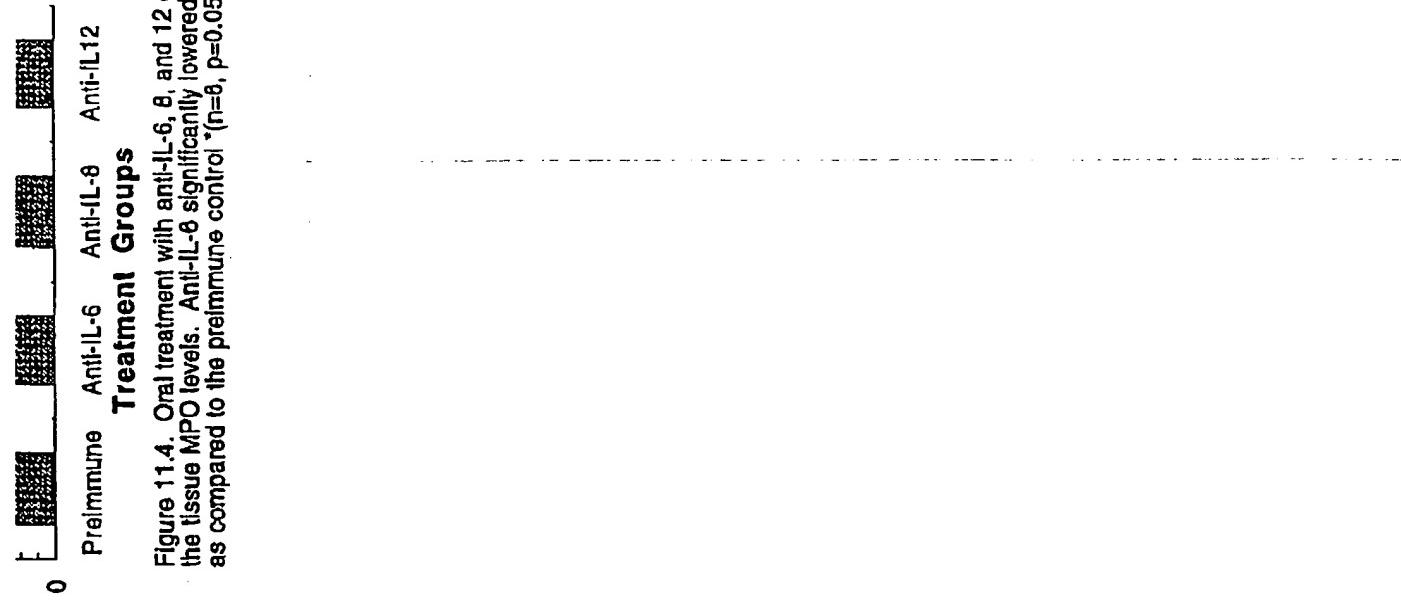


Figure 12

Acute Model of IBD: Weight Data

